



ENROLLMENT CHANGES

Return Forms to Enrollment Office, 6700 Totem Beach Rd., Tulalip, Wa 98271 Fax (360)651-3701

****Only the legal parent or guardian can fill this form out for a minor.****

****All the information that is provided is kept highly confidential.****

Name: _____ Roll#: _____

Mailing Address: _____

Street Address: _____

City: _____ St: _____ Zip: _____

Phone: _____ County: _____

Please include children with address changes:

1.) _____ Roll # _____

2.) _____ Roll # _____

3.) _____ Roll # _____

Custody Change - Must have court documentation.

☐ Custody Change: _____

Name Change - Must have Legal documents to change name.

Old Name: _____

New Name: _____

Newsletter/Mailings - Only one address per household.

☐ Change or add my address for the Newsletters and Mailings.

☐ I am 50 and over and would like to be on the Senior Mailing list.

Signature: _____ **Date:** _____

*****Official Use Only*****

Documents Attached:

☐ Court Papers ☐ Marriage Certificate ☐ Notarized Letter

Enrollment Staff _____ Date: _____

☐ Progeny ☐ MOM System

Front Desk _____ Date: _____